

<p>Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</p> <h2 style="text-align: center;">FEE TRANSMITTAL</h2> <h3 style="text-align: center;">For FY 2009</h3>		<p><b>Complete if Known</b></p> <p>Application Number 10/540,137-Conf. #5350</p> <p>Filing Date June 21, 2005</p> <p>First Named Inventor Nohee PARK</p> <p>Examiner Name D. M. Oveissi</p> <p>Art Unit 2616</p> <p>Attorney Docket No. 5184-0101PUS1</p>	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
<b>TOTAL AMOUNT OF PAYMENT</b> (\$) <b>1290.00</b>			

<b>METHOD OF PAYMENT</b> (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account    Deposit Account Number: <u>02-2448</u> Deposit Account Name: <u>Birch, Stewart, Kolasch &amp; Birch, LLP</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	

FEE CALCULATION																																																
1. BASIC FILING, SEARCH, AND EXAMINATION FEES																																																
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)																																									
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)																																										
Utility	330	165	540	270	220	110																																										
Design	220	110	100	50	140	70																																										
Plant	220	110	330	165	170	85																																										
Reissue	330	165	540	270	650	325																																										
Provisional	220	110	0	0	0	0																																										
2. EXCESS CLAIM FEES																																																
Fee Description							Small Entity Fee (\$)																																									
Each claim over 20 (including Reissues)							52																																									
Each independent claim over 3 (including Reissues)							220																																									
Multiple dependent claims							390																																									
<table border="0" style="width: 100%;"> <tr> <td><b>Total Claims</b></td> <td><b>Extra Claims</b></td> <td><b>Fee (\$)</b></td> <td><b>Fee Paid (\$)</b></td> <td><b>Multiple Dependent Claims</b></td> <td><b>Fee (\$)</b></td> <td><b>Fee Paid (\$)</b></td> </tr> <tr> <td>11</td> <td>- 20 or HP</td> <td>x</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="7">HP = highest number of total claims paid for, if greater than 20.</td> </tr> <tr> <td><b>Indep. Claims</b></td> <td><b>Extra Claims</b></td> <td><b>Fee (\$)</b></td> <td><b>Fee Paid (\$)</b></td> <td></td> <td></td> <td></td> </tr> <tr> <td>2</td> <td>- 3 or HP</td> <td>x</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="7">HP = highest number of independent claims paid for, if greater than 3.</td> </tr> </table>							<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Multiple Dependent Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	11	- 20 or HP	x					HP = highest number of total claims paid for, if greater than 20.							<b>Indep. Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>				2	- 3 or HP	x					HP = highest number of independent claims paid for, if greater than 3.						
<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Multiple Dependent Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>																																										
11	- 20 or HP	x																																														
HP = highest number of total claims paid for, if greater than 20.																																																
<b>Indep. Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>																																													
2	- 3 or HP	x																																														
HP = highest number of independent claims paid for, if greater than 3.																																																
3. APPLICATION SIZE FEE																																																
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).																																																
<table border="0" style="width: 100%;"> <tr> <td><b>Total Sheets</b></td> <td><b>Extra Sheets</b></td> <td><b>Number of each additional 50 or fraction thereof</b></td> <td><b>Fee (\$)</b></td> <td><b>Fee Paid (\$)</b></td> </tr> <tr> <td></td> <td>- 100 =</td> <td>/50 =</td> <td>(round up to a whole number) x</td> <td></td> </tr> </table>								<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>		- 100 =	/50 =	(round up to a whole number) x																																
<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>																																												
	- 100 =	/50 =	(round up to a whole number) x																																													
4. OTHER FEE(S)																																																
Non-English Specification, \$130 fee (no small entity discount)																																																
Other (e.g., late filing surcharge): 1806 Submission of an Information Disclosure Statement <b>\$180.00</b>																																																
1253 Extension for response within third month <b>\$1,110.00</b>																																																

<b>SUBMITTED BY</b>		<b>Registration No.</b>		<b>Telephone</b>	
Signature <u>Michael E. Monaco</u>		(Attorney/Agent) 39,538		(703) 205-8000	
Name (Print/Type) James T. Eller, Jr.				Date December 29, 2008	

**Michael E. Monaco**  
Registration No. 52,041